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From: IPU  
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cc: PS/Ministers  
PS/PUS  
Political Director  
Director MENA  
Head MED  
Crisis Manager EU  
Iraq Planning Unit Distribution

Reference:

To: PS

**SUBJECT: HMG HUMANITARIAN PLANNING**

1. The attached information note sets out HMG humanitarian contingency planning for Iraq including provisions already made and potential risks.
2. Further details are available from me. Oral briefings are available from DFID on request.

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NO. OF ATTACHMENTS: 1

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## HMG HUMANITARIAN PLANNING

The Government's preparations for a possible humanitarian crisis in Iraq are now moving ahead very quickly. DFID is coordinating this work in close consultation with MoD and FCO. We are focusing on three main areas.

### **Military plans**

The UK military is factoring humanitarian considerations into their plans; both to minimise the risks to the Iraqi population and the infrastructure on which they depend, and to ensure that they meet their obligations under the Hague and Geneva Conventions governing armed conflict. These include providing the local population with water, food, shelter, medical care and other supplies necessary to survival if these needs are not being met from elsewhere.

Up to £30m has been allocated by HMT to the military for this purpose. An additional £10m has been allocated for ~~Quick Impact Projects~~ (OUIPs), some of which will meet humanitarian needs. This is to cover the initial period until the security situation stabilises sufficiently for civilian agencies to begin work inside Iraq. DFID has seconded two humanitarian specialists to work with UK 1 Division to advise on relief activities. The US military have also made plans to meet immediate needs and will deploy with 2000 civil affairs officers. We hope civilian agencies will be able to begin work as possible; it is far preferable for humanitarian assistance to be delivered by civilians.

### **DFID, UN, NGOs**

DFID is working with UN Agencies and NGOs to address humanitarian needs wherever they are greatest. DFID has earmarked a total of £70m for the humanitarian response. £20 million has already been committed to UN Agencies and NGOs to assist with their preparations. DFID is keeping the situation under close review and stands ready to commit additional funds as required.

DFID has deployed staff in the region, including Kuwait, Jordan and Iran to monitor and assess humanitarian needs and to liaise with UN Agencies and NGOs. Further staff will be deployed as circumstances dictate.

DFID has also seconded specialists to the World Food Programme and the UN Office for the Co-ordination of Humanitarian Affairs (OCHA), and are considering requests from other parts of the UN system. In addition, a specialist has been seconded to the US Office for Reconstruction and Humanitarian Affairs (ORHA) in Kuwait to help with their humanitarian planning and coordination with other partners.

DFID has also prepositioned humanitarian supplies in the region and has direct access to additional supplies in the UK. These will be deployed if and when necessary to fulfil emergency requirements.

### **Oil for Food**

The third area we are focusing on is ensuring that the Oil for Food programme, on which up to 60% of the Iraqi population are dependent, is disrupted as little as possible. We are seeking a UN Security Council Resolution to transfer authority for

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administering this programme to the UN Secretary General. DFID is also discussing with the World Food Programme what additional resources they need to procure more food to cope with the temporary interruption to the programme.

## **The Gap**

We think that many civilian agencies are likely to begin operating inside Iraq in under 30 days, as areas become sufficiently secure. However, until a permissive security environment is established, the main humanitarian providers will be military, Red Cross, and local staff working for the UN and NGOs. There is some capability to respond to low intensity humanitarian needs. The military have limited capacity to deliver potable water, shelter, food and medical assistance for a short period, for limited numbers.

However, this will prove to be inadequate in the event of a protracted conflict (particularly around Baghdad or the North), significant damage to infrastructure and/or large-scale movements of people. The threat/use of CBW could trigger a humanitarian disaster. If used on a wide scale, it would cause large numbers of casualties and population movement resulting in internally displaced people and/or refugees, whose needs will be considerable. Even if used on a limited scale, perceptions of the threat would likely still result in large population movement. MoD and DFID are urgently assessing the scope to provide emergency medical provision and public information in this scenario.

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